		Application or Docket Number	
PATENT APPLICATIO	N FEE DETERMINATION RECO	THAN	
CLAIMS AS	(Column 1) (Column 2)	TYPE OR SMALL ENTITY	
TOTAL CLAIMS	(Column 1) (Column 2)	RATE FEE RATE FEE	1
	NUMBER FILED NUMBER EXTRA	BASIC FEE 355.00 OR	1
FOR TOTAL CHARGEABLE CLAIMS	∂∂ minus 20= ' ∂	X\$ 9= OR X\$18=	1
INDEPENDENT CLAIMS	minus 3 = 1	X40= OR X80=	1
MULTIPLE DEPENDENT CLAIM	PRESENT	+135= OR +270=	4
* If the difference in column 1 is	s less than zero, enter "0" in column 2	TOTAL OR TOTAL OTHER THAN	1
CLAIMS AS	AMENDED - PART II	SMALL ENTITY OR SMALL ENTITY	_
(Column 1) (COlumn 2) (COLUMN 2) HIGHEST	ADDI-	NL
CLAIMS REMAINING AFTER AMENDMEN	PREVIOUSLY EXTRA	FEE FEE	力
AMENDMEN Total	Minus " dd = 1	X8-9= OH STO CAS	5
	Minus G = F	1 1	7
FIRST PRESENTATION OF	MULTIPLE DEPENDENT CLAIM	+135= On TOTAL 6///	01
		ADDIT. FEE	7
(Column	1) (Column 2) (Column HIGHEST	ADDI-	
CLAIMS REMAINII AFTEF	NUMBER PRESE NG PREVIOUSLY EXTR	PENT RATE HONAL ''''' FE	
AMENDM Total	PAID FOR Minus ••	X\$ 9= OR X\$18=	
	Minus ••• =	X40= OR X80=	
Independent • FIRST PRESENTATION	OF MULTIPLE DEPENDENT CLAIM	+135= OR +270=	
		TOTAL OR ADDIT. FEE	
	(Column 2) (Colu	umn 3)	DDI-
(Colum CLAI REMAI	MS HIGHEST NUMBER PRE	ESENT RATE TIONAL RATE TIC	ONAL FEE
ACT	ER PAID FOR	FEE YS18=	
Total •	Minus •• =	X\$ 9= VA	
Total * Independent * FIRST PRESENTATION	N OF MULTIPLE DEPENDENT CLAIM	X40= OH +270=	
FIRST PRESENTATION	V OT MOUTH TO SEE	+135= OR +270=	

^{*} If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

**If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

**If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

***If the "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.